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22387 U.S. PTO
10/822873

041304

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	3802-088-27 CONT
	First Inventor or Application Identifier	DANIEL R. HENDERSON
	Title	TISSUE SPECIFIC ADENOVIRAL VECTORS

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application PO Box 1450 Alexandria, VA 22313-1450
1. <input type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing) <input checked="" type="checkbox"/> Applicant claims small entity status. 2. <input checked="" type="checkbox"/> Specification Total Pages 127 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 44 4. <input type="checkbox"/> Oath or Declaration Total Pages <input type="text"/> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 16 completed) 5. <input type="checkbox"/> Incorporation By Reference (usable if box 4B is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4B, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	ACCOMPANYING DOCUMENTS 6. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 7. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 8. <input type="checkbox"/> English Translation Document (if applicable) 9. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 10. <input checked="" type="checkbox"/> Preliminary Amendment 11. <input checked="" type="checkbox"/> White Advance Serial No. Postcard 12. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 13. <input type="checkbox"/> Request for Priority 14. <input checked="" type="checkbox"/> List of Inventors' Names and Addresses 15. <input type="checkbox"/> Other:
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: 09/732,169 Prior application information: Examiner: Brian A. Whiteman Group Art Unit: 1635	
17. Amend the specification by inserting before the first line the sentence: <input checked="" type="checkbox"/> This application is a <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. 09/732,169, filed December 6, 2000, now U.S. Patent Application Publication No. 2002/0068049 A1, published June 6, 2002, which is a Continuation of U.S. Patent Application No. 09/151,376, filed September 10, 1998, now U.S. Patent No. 6,676,935, issued January 13, 2004, which is a Continuation-In-Part of U.S. Patent Application No. 08/669,753, filed June 26, 1996, now U.S. Patent No. 5,871,726, issued February 16, 1999, which is a Continuation-In-Part of U.S. Patent Application No. 08/495,034, filed June 27, 1995, now U.S. Patent No. 5,698,443, issued December 16, 1997. <input type="checkbox"/> This application claims priority of provisional application Serial No. Filed	
18. CORRESPONDENCE ADDRESS Supervisor, Patent Prosecution Services PIPER RUDNICK LLP 1200 Nineteenth Street, N.W. Washington, D.C. 20036-2412 Telephone No. (202) 861-3900 Facsimile No. (202) 223-2085	

Name	Steven B. Kelber	Registration No.	30,073
Signature		Date	4/13/04
Name	Sue Jensen, M.D.	Registration No.	55,775
		Telephone	202-861-3900



041304

FEE TRANSMITTAL						Docket No.		3802-088-27 CONT					
						Serial No.		New Application					
						Filing Date		Herewith					
						Inventor(s)		Daniel R. HENDERSON, et al.					
						Group Art Unit							
TOTAL AMOUNT OF PAYMENT				\$450.00		Examiner							
1. <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442. <input type="checkbox"/> Charge the indicated fees to Deposit Account No. 50-1442.						FEE CALCULATION (continued)							
						3. ADDITIONAL FEES							
						Large Entity		Small Entity		Fee Description			
2. <input type="checkbox"/> Check enclosed.						Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Paid		
FEE CALCULATION						1051	130	2051	65	Surcharge-late filing fee or oath	\$65		
1. BASIC FILING FEE						1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet			
Large Entity		Small Entity		Fee Description		1053	130	1053	130	Non-English Specification			
Fee Code	Fee (\$)	Fee Code	Fee (\$)			Fee Paid	1251	110	2251	55	1-mo. ext. of time		
1001	770	2001	385	Utility filing fee		\$385	1252	420	2252	210	2-mo. ext. of time		
1002	340	2002	170	Design filing fee			1253	950	2253	475	3-mo. ext. of time		
1003	520	2003	260	Plant filing fee			1254	1480	2254	740	4-mo. ext. of time		
1004	770	2004	385	Reissue filing fee			1255	2010	2255	1005	5-mo. ext. of time		
1005	160	2005	80	Provisional filing fee			1401	330	2401	165	Notice of Appeal		
SUBTOTAL (1)						\$385.00	1402	330	2402	165	Appeal Brief		
2. EXTRA CLAIM FEES						1403	290	2403	145	Request for Oral Hearing			
tot. claims		6	-	20*	= 0	x \$9	=	0	1501	1330	2501	665	Utility/Reissue Issue Fee
ind. claims		2	-	3*	= 0	x \$43	=	0	1502	480	2502	240	Design Issue Fee
<input type="checkbox"/> Multiple Dependent Claims						\$145	=		1504	300	1504	300	Publication Fee
Large Entity		Small Entity		Fee Description		8001	3	8001	3	Advance Copy of Patent			
Fee Code	Fee (\$)	Fee Code	Fee (\$)			1460	130	1460	130	Petitions to the Commissioner			
1202	18	2202	9	Claims in excess of 20		1806	180	1806	180	IDS Submission			
1201	86	2201	43	Independent claims in excess of 3		8021	40	8021	40	Assignment recordation			
1203	290	2203	145	Multiple dependent claim, if not paid		1801	770	2801	385	For Filing RCE			
1204	84	2204	43	*Reissue independent claims over original patent		1814	110	2814	55	Terminal Disclaimer			
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent		OTHER (indicate below):							
SUBTOTAL (2)						\$0.00							
* or number previously paid, if greater; For Reissues, see above						SUBTOTAL (3)							
						\$65.00							

Name		Steven B. Kelber		Registration No.		30,073	
Signature				Date	4/13/04	Telephone	202-861-3900
Name		Sue Jensen, M.D.		Registration No.		55,775	

DOCKET NO. 3802-088-27 CONT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Daniel R. HENDERSON, et al. ART UNIT:
SERIAL NO.: New Application EXAMINER:
FILING DATE: Herewith
FOR: TISSUE SPECIFIC ADENOVIRAL VECTORS

LIST OF INVENTORS' NAMES AND ADDRESSES

ASSISTANT COMMISSIONER FOR PATENTS
PO BOX 1450
ALEXANDRIA, VA 22313-1450

SIR:

Listed below are the names and addresses of the inventors for the above-identified patent application.

- 1) Daniel R. Henderson
Palo Alto, California
- 2) Eric R. Schuur
Palo Alto, California

A declaration containing all the necessary information will be submitted at a later date.

Respectfully submitted,

PIPER RUDNICK LLP



Steven B. Kelber
Registration No. 30,073
Attorney of Record

1200 Nineteenth Street, N.W.
Washington, D.C. 20036-2412
Telephone No. (202) 861-3900
Facsimile No. (202) 223-2085